

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Arizona Republican Party

ADDRESS (number and street)

3501 North 24th Street

☐Check if different
than previously
reported. (ACC)

Phoenix

AZ

85016

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00008227

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☒

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

03

01

2009

through

03

31

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Timothy Lee

Signature of Treasurer

Electronically Filed by Timothy Lee

Date

04

20

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Arizona Republican Party

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2009		30370.59
(b) Cash on Hand at Beginning of Reporting Period	59208.99	
(c) Total Receipts (from Line 19)	34309.30	146598.99
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	93518.29	176969.58
7. Total Disbursements (from Line 31)	50831.28	134282.57
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	42687.01	42687.01
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
Arizona Republican Party

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	5475.00	30845.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	28834.30	104942.05
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	34309.30	135787.05
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤	34309.30	135787.05
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	311.94
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	10500.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	10500.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	34309.30	146598.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	34309.30	136098.99

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	2955.72
(ii) Non-Federal Share.....	0.00	11119.18
(b) Other Federal Operating Expenditures.....	31350.83	88212.31
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	31350.83	102287.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	2500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	19480.45	29495.36
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	19480.45	29495.36
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	50831.28	134282.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	50831.28	123163.39

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	34309.30	135787.05
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	34309.30	135787.05
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	31350.83	91168.03
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	311.94
38. Net Operating Expenditures (subtract Line 37 from Line 36)	31350.83	90856.09

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Lehman Beardsley

Mailing Address 7388 E. Laredo Ln.

City

Scottsdale

State

AZ

Zip Code

85250-6473

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: 90420.C85205

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Brent Berge

Mailing Address 2052 E Hermosa Vista

City

Mesa

State

AZ

Zip Code

85213-2212

FEC ID number of contributing
federal political committee.

C

Name of Employer
Berge Mazda

Occupation

Auto Dealer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 7 / 2 0 0 9

Transaction ID: 90420.C85215

Amount of Each Receipt this Period

325.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Ray Brown

Mailing Address 141 S McCormick St, Ste 211

City

Prescott

State

AZ

Zip Code

86303

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 7 / 2 0 0 9

Transaction ID: 90420.C85238

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional)

625.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

John Edgerton

Mailing Address 1072 W. Camino Urbano

City

Green Valley

State

AZ

Zip Code

85614-4802

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 4 / 2 0 0 9

Transaction ID: 90420.C85387

Amount of Each Receipt this Period

300.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Joan Ellinwood

Mailing Address PO Box 1445

City

Tubac

State

AZ

Zip Code

85646-1445

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 4 / 2 0 0 9

Transaction ID: 90420.C85410

Amount of Each Receipt this Period

500.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Leslie Friedman

Mailing Address 6313 E Sandra Terr

City

Scottsdale

State

AZ

Zip Code

85254-1343

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dept of Veterans AffairsOccupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 0 / 2 0 0 9

Transaction ID: 90320.C85037

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Judith Hjartarson

Mailing Address 8812 E Sonoran Way

City

Gold Canyon

State

AZ

Zip Code

85218-7131

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 3 / 2 0 0 9

Transaction ID: 90320.C84878

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Cheryl Keithly

Mailing Address 5702 W. County 8-1/2 St.

City

Yuma

State

AZ

Zip Code

85364-8425

FEC ID number of contributing
federal political committee.

C

Name of Employer
Keithly Williams SeedsOccupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 7 / 2 0 0 9

Transaction ID: 90420.C85214

Amount of Each Receipt this Period

250.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Carolyn King

Mailing Address P.O. Box 710

City

Carefree

State

AZ

Zip Code

85377-0710

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 90420.C85254

Amount of Each Receipt this Period

300.00

Receipt

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Gregory Lampe

Mailing Address 12323 E. Shangri-La Rd.

City

Scottsdale

State

AZ

Zip Code

85259

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: 90420.C85166

Amount of Each Receipt this Period

200.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Janet McGee

Mailing Address 18607 E. Hierro Cir.

City

Rio Verde

State

AZ

Zip Code

85263-5096

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: 90420.C85190

Amount of Each Receipt this Period

225.00

Receipt

C.

Full Name (Last, First, Middle Initial)

John McHenry

Mailing Address 13373 N Plaza Del Rio Blvd., Apt 4

City

Peoria

State

AZ

Zip Code

85381

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 9

Transaction ID: 90420.C85644

Amount of Each Receipt this Period

300.00

Receipt

SUBTOTAL of Receipts This Page (optional)

725.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Mildred Olegar

Mailing Address 10909 Amber Trail

City

Sun City

State

AZ

Zip Code

85351-1048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 4 / 2 0 0 9

Transaction ID: 90420.C85921

Amount of Each Receipt this Period

100.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Marvin Schneider

Mailing Address 4350 E Camelback Rd, Ste F100

City

Phoenix

State

AZ

Zip Code

85018-8313

FEC ID number of contributing
federal political committee.

C

Name of Employer
FPS

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 4 / 2 0 0 9

Transaction ID: 90420.C85917

Amount of Each Receipt this Period

250.00

Receipt

C.

Full Name (Last, First, Middle Initial)

James Seiberlich

Mailing Address 21612 Yellowstone Ct

City

Sun City West

State

AZ

Zip Code

85375-5952

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 0 / 2 0 0 9

Transaction ID: 90420.C85670

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Beverly Stanton

Mailing Address 21335 N Shotgun Ridge Road

City

Paulden

State

AZ

Zip Code

86334-4322

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 2 / 2 0 0 9

Transaction ID: 90320.C84962

Amount of Each Receipt this Period

300.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Jerry Taylor

Mailing Address 30 E Concorda Dr

City

Tempe

State

AZ

Zip Code

85282-3517

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 5 / 2 0 0 9

Transaction ID: 90420.C85537

Amount of Each Receipt this Period

250.00

Receipt

C.

Full Name (Last, First, Middle Initial)

N L Thomas

Mailing Address 700 N Dobson Rd, N 31

City

Chandler

State

AZ

Zip Code

85224-6940

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pioneer Equipment Inc

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 0 / 2 0 0 9

Transaction ID: 90320.C85057

Amount of Each Receipt this Period

300.00

Receipt

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Gregory Thorley

Mailing Address 6018 N Palo Cristi Rd

City

Paradise Valley

State

AZ

Zip Code

85253-3728

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 4 / 2 0 0 9

Transaction ID: 90420.C85421

Amount of Each Receipt this Period

200.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Conrad Tvedt

Mailing Address 21220 N. Shamrock Dr.

City

Sun City West

State

AZ

Zip Code

85375-5461

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 0 / 2 0 0 9

Transaction ID: 90420.C85668

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Lyndis Webb

Mailing Address 2300 W Chico Lane

City

Yuma

State

AZ

Zip Code

85365-3804

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: 90420.C85097

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

J. Ronald White

Mailing Address 2595 Turkey Track St.

City

Kingman

State

AZ

Zip Code

86401-7331

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Land Surveyor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 5 / 2 0 0 9

Transaction ID: 90420.C85557

Amount of Each Receipt this Period

125.00

Receipt

B.

Full Name (Last, First, Middle Initial)

R L Williams

Mailing Address 5550 N Yucca Rd

City

Paradise Valley

State

AZ

Zip Code

85253-5240

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: 90420.C85106

Amount of Each Receipt this Period

200.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Margaret Wright

Mailing Address 3623 N. 54th Court

City

Phoenix

State

AZ

Zip Code

85018-4555

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: 90420.C85072

Amount of Each Receipt this Period

400.00

Receipt

SUBTOTAL of Receipts This Page (optional)

725.00

TOTAL This Period (last page this line number only)

5475.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Arizona Republican Party

A. Full Name (Last, First, Middle Initial) Pinnacle List Company	Transaction ID: 90420.E10157 Date of Disbursement																				
Mailing Address 2800 S Shirlington Rd Ste 970	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	1		2	0	0	9												
City Arlington State VA Zip Code 22206-3613	Amount of Each Disbursement this Period																				
Purpose of Disbursement Party direct mail Candidate Name	<table border="1"> <tr> <td colspan="10">2833.26</td> </tr> </table>	2833.26																			
2833.26																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	PARTY DIRECT MAIL																				
B. Full Name (Last, First, Middle Initial) Auto Owners	Transaction ID: 90420.E10126 Date of Disbursement																				
Mailing Address P.O. Box 30078	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	7		2	0	0	9												
City Lansing State MI Zip Code 48909-75	Amount of Each Disbursement this Period																				
Purpose of Disbursement Liability insurance Candidate Name	<table border="1"> <tr> <td colspan="10">500.90</td> </tr> </table>	500.90																			
500.90																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	LIABILITY INSURANCE																				
C. Full Name (Last, First, Middle Initial) Southwest Publishing & Mailing Co	Transaction ID: 90420.E10160 Date of Disbursement																				
Mailing Address 2600 NW Topeka Blvd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	9												
City Topeka State KS Zip Code 66617-56	Amount of Each Disbursement this Period																				
Purpose of Disbursement Party direct mail Candidate Name	<table border="1"> <tr> <td colspan="10">2515.05</td> </tr> </table>	2515.05																			
2515.05																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	PARTY DIRECT MAIL																				

SUBTOTAL of Disbursements This Page (optional)

5849.21

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Arizona Republican Party

A. Full Name (Last, First, Middle Initial)
Southwest Publishing & Mailing Co

Mailing Address 2600 NW Topeka Blvd.

City Topeka State KS Zip Code 66617-56

Purpose of Disbursement
Party direct mail

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90420.E10161

Date of Disbursement

03 / 31 / 2009

Amount of Each Disbursement this Period

5994.57

PARTY DIRECT MAIL

B. Full Name (Last, First, Middle Initial)
Waste Management

Mailing Address 1580 E Elwood St.

City Phoenix State AZ Zip Code 85040-

Purpose of Disbursement
Trash collection

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90420.E10140

Date of Disbursement

03 / 17 / 2009

Amount of Each Disbursement this Period

178.20

TRASH COLLECTION

C. Full Name (Last, First, Middle Initial)
Association Maintenance Servic

Mailing Address PO Box 5340

City Peoria State AZ Zip Code 85385-

Purpose of Disbursement
Landscaping services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90420.E10125

Date of Disbursement

03 / 17 / 2009

Amount of Each Disbursement this Period

310.00

LANDSCAPING SERVICES

SUBTOTAL of Disbursements This Page (optional)

6482.77

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Arizona Republican Party

A. Full Name (Last, First, Middle Initial) CBIZ MHM, LLC	Transaction ID: 90420.E10127 Date of Disbursement
Mailing Address 175 South West Temple Suite 650	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 6 / 2 0 0 9</div> </div>
City Salt Lake State UT Zip Code 84101-	Amount of Each Disbursement this Period
Purpose of Disbursement FEC Reporting Candidate Name	<div> <div>1000.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEC REPORTING
B. Full Name (Last, First, Middle Initial) CBIZ MHM, LLC	Transaction ID: 90420.E10150 Date of Disbursement
Mailing Address 175 South West Temple Suite 650	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 1 / 2 0 0 9</div> </div>
City Salt Lake State UT Zip Code 84101-	Amount of Each Disbursement this Period
Purpose of Disbursement FEC Reporting Candidate Name	<div> <div>1200.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEC REPORTING
C. Full Name (Last, First, Middle Initial) Francisco Grande	Transaction ID: 90420.E10153 Date of Disbursement
Mailing Address 26000 West Gila Bend Hwy	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 1 / 2 0 0 9</div> </div>
City Casa Grande State AZ Zip Code 85222-	Amount of Each Disbursement this Period
Purpose of Disbursement ???? Candidate Name	<div> <div>1000.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	????

SUBTOTAL of Disbursements This Page (optional)

3200.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

M & I Thunderbird Bank

Mailing Address 1 E Camelback Rd

City
Phoenix

State
AZ

Zip Code
85012-3224

Purpose of Disbursement
Credit card payment see below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90420.E10130

Date of Disbursement

Amount of Each Disbursement this Period

300.00

**CREDIT CARD PAYMENT SEE
BELOW**

B.

Full Name (Last, First, Middle Initial)

M & I Thunderbird Bank

Mailing Address 1 E Camelback Rd

City
Phoenix

State
AZ

Zip Code
85012-3224

Purpose of Disbursement
Credit card payment see below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90420.E10129

Date of Disbursement

Amount of Each Disbursement this Period

300.00

**CREDIT CARD PAYMENT SEE
BELOW**

C.

Full Name (Last, First, Middle Initial)

M & I Thunderbird Bank

Mailing Address 1 E Camelback Rd

City
Phoenix

State
AZ

Zip Code
85012-3224

Purpose of Disbursement
Credit card payment see below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90420.E10131

Date of Disbursement

Amount of Each Disbursement this Period

300.00

**CREDIT CARD PAYMENT SEE
BELOW**

SUBTOTAL of Disbursements This Page (optional)

900.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Arizona Republican Party

A. Full Name (Last, First, Middle Initial) M & I Thunderbird Bank Mailing Address 1 E Camelback Rd	Transaction ID: 90420.E10132 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 7 / 2 0 0 9</div> </div>
City Phoenix State AZ Zip Code 85012-3224 Purpose of Disbursement Credit card payment see below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>300.00</div> CREDIT CARD PAYMENT SEE BELOW
B. Full Name (Last, First, Middle Initial) Brett Mecum Mailing Address 2936 W Gregg Dr City Chandler State AZ Zip Code 85224- Purpose of Disbursement Reimbursement see below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90420.E10144 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 6 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>1349.10</div> REIMBURSEMENT SEE BELOW
C. Full Name (Last, First, Middle Initial) Mobile Mini, Inc. Mailing Address P.O. Box 79149 City Phoenix State AZ Zip Code 85062-9149 Purpose of Disbursement Storage rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90420.E10155 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 1 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>134.29</div> STORAGE RENTAL

SUBTOTAL of Disbursements This Page (optional)

1783.39

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)
Phoenix Biltmore Embassy Suites

Mailing Address 2630 East Camelback Road

City Phoenix State AZ Zip Code 85016-

Purpose of Disbursement
Rental/food for party event

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90420.E10156

Date of Disbursement

03 / 31 / 2009

Amount of Each Disbursement this Period

3000.00

RENTAL/FOOD FOR PARTY EVENT

B.

Full Name (Last, First, Middle Initial)
Post Master

Mailing Address

City Phoenix State AZ Zip Code 85016-

Purpose of Disbursement
Business reply postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90420.E10133

Date of Disbursement

03 / 10 / 2009

Amount of Each Disbursement this Period

1000.00

BUSINESS REPLY POSTAGE

C.

Full Name (Last, First, Middle Initial)
Sharenet Communications Company

Mailing Address PO Box 14349

City Phoenix State AZ Zip Code 85063-

Purpose of Disbursement
Office telecommunications

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90420.E10159

Date of Disbursement

03 / 31 / 2009

Amount of Each Disbursement this Period

839.42

OFFICE TELECOMMUNICATIONS

SUBTOTAL of Disbursements This Page (optional)

4839.42

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)
SRP

Mailing Address P.O. Box 2950

City Phoenix State AZ Zip Code 85062-29

Purpose of Disbursement
Utilities

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90420.E10136

Date of Disbursement

/

Amount of Each Disbursement this Period

379.09

UTILITIES

B.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address PO Box 6721

City The Lakes State NV Zip Code 88901-67

Purpose of Disbursement
Office supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90420.E10137

Date of Disbursement

/

Amount of Each Disbursement this Period

1021.28

OFFICE SUPPLIES

C.

Full Name (Last, First, Middle Initial)
Steve Brown Direct Mail

Mailing Address 731 Divot Drive

City Fernley State NV Zip Code 89408-

Purpose of Disbursement
Party direct mail

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90420.E10138

Date of Disbursement

/

Amount of Each Disbursement this Period

2902.28

PARTY DIRECT MAIL

SUBTOTAL of Disbursements This Page (optional)

4302.65

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 26

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)
Strategic Fundraising, Inc.

Mailing Address 7591 9th Street North

City State Zip Code
Saint Paul MN 55128-

Purpose of Disbursement
Party telemarketing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90420.E10162
Date of Disbursement

/ /

Amount of Each Disbursement this Period

295.00

PARTY TELEMARKETING

B.

Full Name (Last, First, Middle Initial)
Windstone Technologies

Mailing Address 1645 E. Missouri Ave
Suite 320

City State Zip Code
Phoenix AZ 85016-

Purpose of Disbursement
Computer services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90420.E10141
Date of Disbursement

/ /

Amount of Each Disbursement this Period

750.86

COMPUTER SERVICES

C.

Full Name (Last, First, Middle Initial)
Windstone Technologies

Mailing Address 1645 E. Missouri Ave
Suite 320

City State Zip Code
Phoenix AZ 85016-

Purpose of Disbursement
Computer services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90420.E10164
Date of Disbursement

/ /

Amount of Each Disbursement this Period

1233.14

COMPUTER SERVICES

SUBTOTAL of Disbursements This Page (optional)

2279.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)

Zona Painting Contractors

Mailing Address 1115 E. Weldon Ave.

City
Phoenix

State
AZ

Zip Code
85014-

Purpose of Disbursement
Janitorial services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90420.E10142

Date of Disbursement

/ /

Amount of Each Disbursement this Period

575.00

JANITORIAL SERVICES

B.

Full Name (Last, First, Middle Initial)

Zona Painting Contractors

Mailing Address 1115 E. Weldon Ave.

City
Phoenix

State
AZ

Zip Code
85014-

Purpose of Disbursement
Janitorial services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90420.E10143

Date of Disbursement

/ /

Amount of Each Disbursement this Period

652.00

JANITORIAL SERVICES

SUBTOTAL of Disbursements This Page (optional)

1227.00

TOTAL This Period (last page this line number only)

30863.44

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Arizona Republican Party

A. Full Name (Last, First, Middle Initial) American Community	Transaction ID: 90420.E10124 Date of Disbursement																				
Mailing Address 39201 Seven Mile Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	7		2	0	0	9												
City Livonia State MI Zip Code 48152-10	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA Health insurance Candidate Name	<table border="1"> <tr> <td colspan="10">440.30</td> </tr> </table>	440.30																			
440.30																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA HEALTH INSURANCE																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
B. Full Name (Last, First, Middle Initial) American Community	Transaction ID: 90420.E10165 Date of Disbursement																				
Mailing Address 39201 Seven Mile Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	0	9												
City Livonia State MI Zip Code 48152-10	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA Health insurance Candidate Name	<table border="1"> <tr> <td colspan="10">440.30</td> </tr> </table>	440.30																			
440.30																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA HEALTH INSURANCE																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
C. Full Name (Last, First, Middle Initial) American Community	Transaction ID: 90420.E10145 Date of Disbursement																				
Mailing Address 39201 Seven Mile Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	1		2	0	0	9												
City Livonia State MI Zip Code 48152-10	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEA Health insurance Candidate Name	<table border="1"> <tr> <td colspan="10">1382.14</td> </tr> </table>	1382.14																			
1382.14																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA HEALTH INSURANCE																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

SUBTOTAL of Disbursements This Page (optional)

2262.74

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Arizona Republican Party

A.

Full Name (Last, First, Middle Initial)
BMS Payroll

Mailing Address 18441 N. 25th Ave
Suite 103

City Phoenix State AZ Zip Code 85023-

Purpose of Disbursement
Payroll see below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90420.E10146

Date of Disbursement

/ /

Amount of Each Disbursement this Period

PAYROLL SEE BELOW

B.

Full Name (Last, First, Middle Initial)
BMS Payroll

Mailing Address 18441 N. 25th Ave
Suite 103

City Phoenix State AZ Zip Code 85023-

Purpose of Disbursement
Payroll taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90420.E10147

Date of Disbursement

/ /

Amount of Each Disbursement this Period

PAYROLL TAXES

C.

Full Name (Last, First, Middle Initial)
BMS Payroll

Mailing Address 18441 N. 25th Ave
Suite 103

City Phoenix State AZ Zip Code 85023-

Purpose of Disbursement
Payroll taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90420.E10148

Date of Disbursement

/ /

Amount of Each Disbursement this Period

PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Arizona Republican Party

<p>A.</p> <p>Full Name (Last, First, Middle Initial) BMS Payroll</p> <p>Mailing Address 18441 N. 25th Ave Suite 103</p> <p>City Phoenix State AZ Zip Code 85023-</p> <p>Purpose of Disbursement Payroll see below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90420.E10149 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 1 / 2 0 0 9</div> </div> </p> <p>Amount of Each Disbursement this Period <div>6062.84</div> </p> <p>PAYROLL SEE BELOW</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Premier Access Insurance Company</p> <p>Mailing Address P.O. Box 659020</p> <p>City Sacramento State CA Zip Code 95865-9020</p> <p>Purpose of Disbursement FEA Employee insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90420.E10134 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 7 / 2 0 0 9</div> </div> </p> <p>Amount of Each Disbursement this Period <div>64.50</div> </p> <p>FEA EMPLOYEE INSURANCE</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Premier Access Insurance Company</p> <p>Mailing Address P.O. Box 659020</p> <p>City Sacramento State CA Zip Code 95865-9020</p> <p>Purpose of Disbursement FEA Employee Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90420.E10158 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 1 / 2 0 0 9</div> </div> </p> <p>Amount of Each Disbursement this Period <div>64.50</div> </p> <p>FEA EMPLOYEE INSURANCE</p>

SUBTOTAL of Disbursements This Page (optional)

6191.84

TOTAL This Period (last page this line number only)

19394.45

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Arizona Republican Party

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- X Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %Nonfederal..... %

This ratio applies to (check all that apply):

Administrative ☐ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐